

Multi-Sector Needs Assessment: Dagahaley Refugee Camp

Garissa County, Kenya, August 2018

Summary

There remain close to 208,000 registered refugees in the Dadaab camps, mostly of Somali origin. With continued conflict, instability and drought, causing new displacement in Somalia and reduced humanitarian funding in Dadaab, there is a need to strengthen information on humanitarian needs and access to assistance and services in the camps. Since May 2017, REACH has worked with the Norwegian Refugee Council (NRC) on developing tools and methodologies for data collection in Dadaab refugee camps.

This factsheet provides an overview of a household-level assessment in Dagahaley refugee camp; one of the three camps which comprise the Dadaab refugee complex with a population of close to 70,000 refugees. This assessment provides an analysis of refugee humanitarian needs, vulnerabilities and access to services across health, food security and livelihoods, protection, shelter and water, sanitation and hygiene (WASH) sectors.

Primary data was collected through household surveys from 1-4 August 2018. A total of 95 households were interviewed. The assessment was sampled to fulfill a confidence level of 95% and a margin of error of 10% at the camp stratum level. This level is guaranteed for all questions that apply to the entire surveyed population of the camp. Findings relating to a subset of the surveyed population may have a higher margin of error.

Protection

HH refugee registration status in Dagahaley:

All members are registered	92%
Some members are registered	7%
No member is registered	1%



Top 3 most commonly reported HH needs:¹

Food	95%
Shelter	66%
Water and sanitation	42%

% of HHs that reported they had been reached by the following protection awareness campaigns:¹

Disability awareness	32%
Child support	24%
Psychosocial support	9%
SGBV ² awareness	8%

% of HHs with at least one member having the following vulnerabilities:

Unaccompanied or separated children	21%
Person living with impairments	13%
Individuals with chronic disease	6%
Pregnant and or lactating women	6%

Security perception by HHs in Dagahaley:

Good	78%
Very good	22%

Refugee perception of relations with the host community in Dagahaley:

Good	66%
Very good	33%
Neutral	1%

Demographics

% of individuals by age group:

5%	0-2	4%
14%	3-5	14%
14%	6-12	9%
8%	13-17	7%
14%	18-59	12%

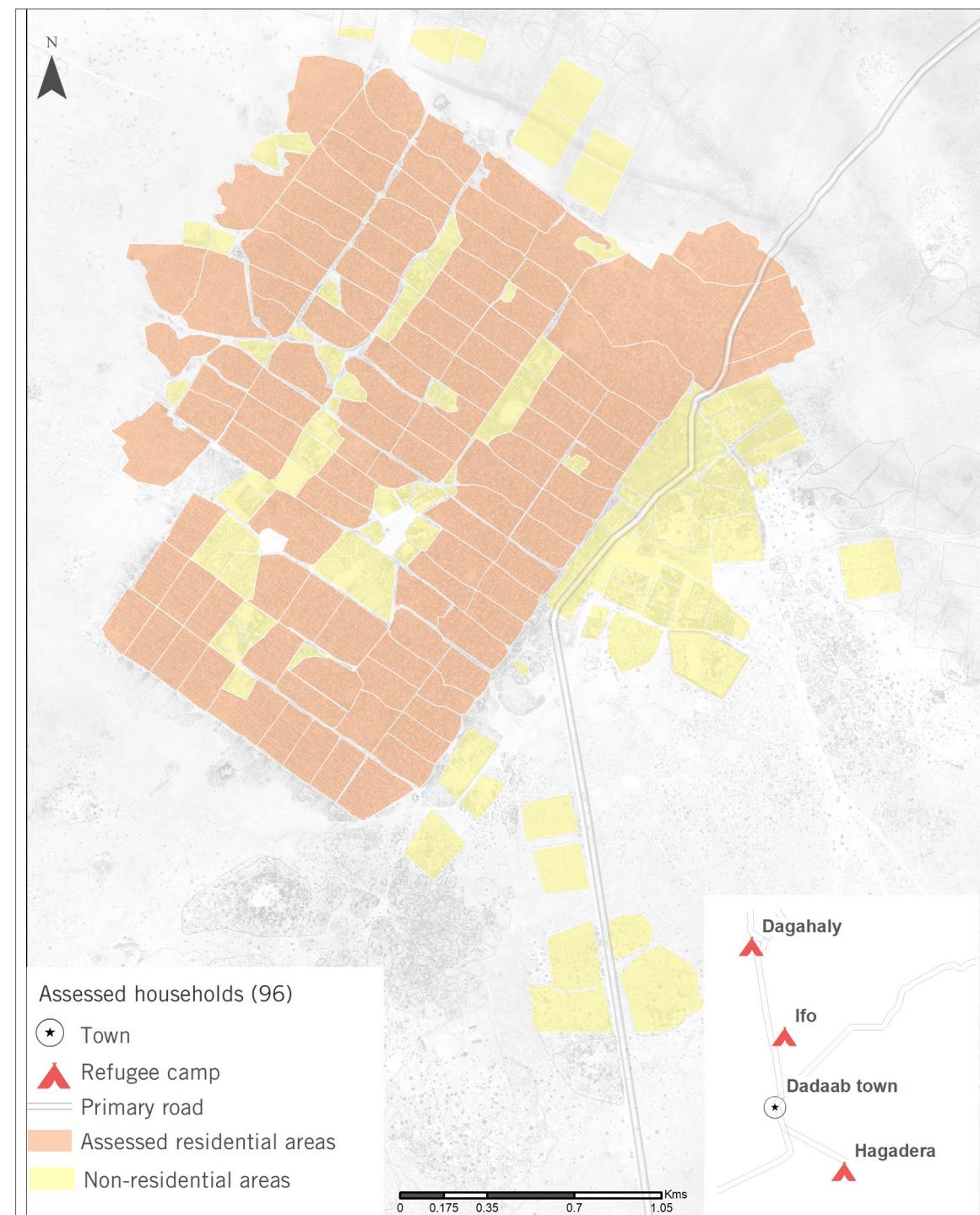
Assessed HHs by country of origin:

Somalia	99%
Ethiopia	1%

Gender distribution of the head of the HHs:

Male	57%
Female	43%

Dagahaley refugee camp



Note:

1. Households could choose multiple answers 2. SGBV- Sexual and gender based violence



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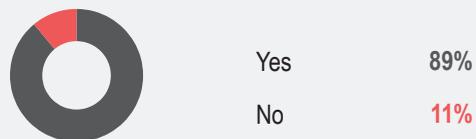
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Water, Sanitation & Hygiene

% of HHs that perceived to have adequate water in the last 30 days:



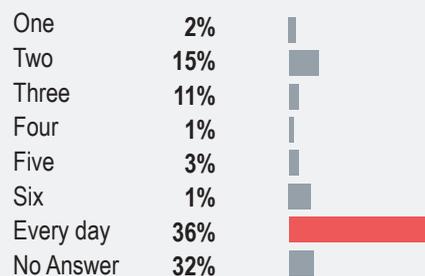
Reported coping strategies to cater for inadequate water:⁴

Reduce drinking water consumption	50%
Fetch water from a more distant water point	40%
Reduce water consumption for hygiene practices	20%
Drink water usually used for other purposes	10%

Average time taken by HHs to walk to the main waterpoint:

30 min or less	40%
More than 1 hour	37%
30 min to 1 hour	23%

Number of days per week a HH member collects water

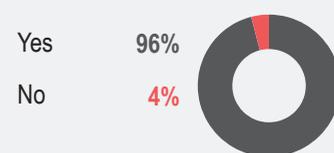


Main problem encountered by HH members while collecting water:

Queuing time	47%
No problem	27%
Long distance	15%
Both distance and queuing	11%

97% of the assessed households reported that all their household members have access to a functioning latrine.

% of households that have soap for handwashing:



Of the 4% who said they do not have soap for handwashing, 50% said they are waiting for the next distribution of non-food items

Health & Nutrition

% of HHs reporting the following as the main primary healthcare provider they access in Dagahaley:

61%	Health post ⁵
39%	Private clinic

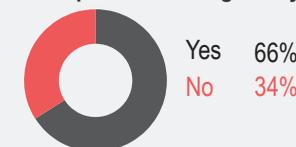
78% of the assessed HHs in Dagahaley said that at least one member of their HH sought medical treatment in the year prior to data collection. 10% of these reported having problems accessing healthcare

9% of the assessed HHs reported that they had at least one member of their HH experienced a significant health issue in the two weeks prior to the assessment.

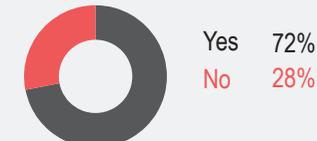
% of HHs reporting the following health issues experienced by at least one member of their HH two weeks prior to data collection:⁴

Hypertension	60%
Malaria	50%
Stress	25%
Malnutrition	25%
Skin condition	13%
Serious injury	13%

% of HHs that has at least one treated mosquito net in Dagahaley:



% of HHs with children under 5 years that have all received polio vaccination:



% of HHs with children under 15 years that have all received measles vaccination:



Food security and Livelihood

Top reported primary livelihood sources in Dagahaley:⁴

No access to livelihoods	55%
Casual labour	28%
Small business	17%

% of HHs with members that earn an income:



Top reported livelihood coping strategies by HHs:⁴

Rely on humanitarian aid	93%
Support from friends and family	4%
None	4%

Main food source in the seven days prior to the assessment:

Humanitarian assistance	98%
Given by family and friends	2%



% of HHs with the following food consumption scores (FCS):³

Poor	31%
Borderline	25%
Acceptable	23%
No answer	21%

25% of the assessed HH in Dagahaley perceived not to have access to sufficient food in the seven days prior to the assessment.

Top reported food coping strategies adopted by HHs:⁴

Reduce number of meals eaten in a day	75%
Limit portion sizes at meal time	38%
Rely on less preferred and cheaper food	8%

Shelter & NFIs

Top reported NFI Needs in Dagahaley:⁴

Mosquito nets	96%
Bedding materials	64%
Water storage items	61%
Kitchen utensils	51%

% of HHs with an improved cooking stove in Dagahaley:



Education

Top reported barriers to children attending school in Dagahaley:⁴

Cannot afford costs	57%
Assist the family chores	24%
Children work instead	9%

Of the 57% who mentioned lack of ability to cover the costs, 95% cited cost of uniform as the major cost they could not afford. Another 79% and 74% cited not being able to afford writing materials and bag respectively

3. The FCS is used as proxy for HH food security and is a composite score based on 1) dietary diversity 2) food frequency and 3) relative nutritional importance of the various food groups consumed by HHs. The FCS is calculated from a 7-day recall and is based on 8 weighted food groups. The FCS is used to classify households into three groups: poor, borderline or acceptable food consumption. The thresholds used here are as follows: ≥ 42 - Acceptable; $\geq 28 < 42$ - Borderline; < 28 - Poor. 21% of the assessed HHs in Dagahaley did not want to talk about food consumption.

4. Households could select multiple answers

5. A health facility which provides outpatient primary health care services including management of common illnesses, antenatal care and post-natal care, immunization, supplementary feeding program and therapeutic feeding programs for severely malnourished under-fives without medical complications.



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